5

PASS/NO CREDIT REQUEST
Office of the Registrar

Date: _____

Name: _____ RIN#: _____ _____ _____
(Print) (LAST) (FIRST) (MI)

Term: Fall ____ yr Spring ____ yr Summer ____ yr Session 1___ Session 2___ Session 3___

E-mail address: _____ Day phone: _____

****CRN# IS 5 DIGIT NUMBER IN LEFT COLUMN OF CLASS HOUR SCHEDULE****

CRN# ___ ___ ___ ___ ___ Course #: ___ ___ ___ ___ __ __ __ __ __ __
subject number section
[Example: 8 0 2 2 9 C S C I 1 1 0 0 0 1]

Course Title:_____

1. This Pass/No Credit designation is valid only when it adheres to the guidelines listed in the Catalog.

2. No course previously failed may be taken Pass/No Credit.
   No course required in the student's major or minor program may be taken Pass/No Credit.
   No course required to be chosen from a list of named courses in the student's major or minor may be taken Pass/No Credit.

3. You may take no more than 12 total credits on Pass/No Credit (16 for the 5-year B. Arch program). No more than 6 credits of these may be Humanities and Social Sciences courses used toward the 24 credit hour H&SS Core Requirement. No more than one course of the Science core may be taken as Pass/No Credit. Courses graded Satisfactory/Unsatisfactory are not included in the above restrictions. A Pass/No credit course may not be used in the H&SS Depth Requirement.

4. Courses at the 6000 level may not be taken Pass/No Credit.

5. Graduate students and non-matriculated students may not put **any** course on Pass/No Credit.

INSTRUCTIONS

1. File this form with the Registrar's Office by the due date listed in the Academic Calendar.
2. Photocopy this page and keep it as your receipt until you receive your semester grades to insure that your grade is properly recorded.
3. If you change to a different section of this course, you MUST switch this Pass/No Credit designation to the new section of the course. Bring this receipt with you to the Registrar's Office to do so.

I certify that the above request complies with the rules of Pass/No Credit as stated in the Catalog, and that the above course is not specifically required by name or required to be chosen from a list of named courses in the student's curriculum.

_____ _____
(Student's Signature) **(Date)**

_____ _____
Advisor's Signature of Approval **Print Advisor's Name**

(03/2012) **PLEASE MAKE PHOTOCOPY FOR YOUR OWN RECORDS**